PTO/SB/06 (08-03)
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PAII	Application or Docket Number 99 / 66373/								
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i i	REMAINING AFTER AMENOMENT		PREVIOUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
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This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public witch-is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Petent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

SEST AVAILABLE COPY													
	PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999 Application or Docket Number Onlice 3, 73)											nber	
CLAIMS AS FILED - PART I (Column 1) (Column 2)									• • • • • • • • • • • • • • • • • • • •	ENTITY	OR	OTHE	THAN
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8/	SIC FEE	•								345.00			690.00
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INE	INDEPENDENT CLAIMS			15 minus 3 =			: 12			 	┨¨`	7220	18.00
ML	MULTIPLE DEPENDENT CLAIM PRESENT								X39=	-	OR	A/6=	936.00
• H	If the difference is column t is less than your A. West								+130=		OR	+260=	•
	* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	1644,0
9	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								Small	ENTITY	OR	OTHER SMALL	
MENT A		REM.	AINING TER IDMENT		PR	IIGHEST IUMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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	the "Highest Nur the "Highest Nu	nber Prev mber Prev	riously Pai viously Pa	id For IN THIS id For IN THIS	S SPAC	E is loss tha E in loss the	in 20, enter "20."		TOTAL DIT. FEE			TOTAL ODIT, FEE	
The "Highest Number Previously Paid For" IN THIS SPACE is tess than 3, enter "3." ADDIT. FEE													